



# VVFC SURVEY

We would appreciate hearing what you think about the Virginia Vaccines for Children Program. Please take a moment to complete this survey. Your answers will help us improve the program to serve you and Virginia's children better.

PIN \_\_\_\_\_ (optional)

Facility Classification : \_\_\_\_\_ Private (Group) \_\_\_\_\_ Private (Solo) \_\_\_\_\_ Public (FQHC or RHC)

Facility Specialty Type: \_\_\_\_\_ Pediatrics \_\_\_\_\_ Family Practice \_\_\_\_\_ Multi-specialty  
 \_\_\_\_\_ Health Dept. Clinic \_\_\_\_\_ Internal Medicine \_\_\_\_\_ Other: \_\_\_\_\_

Total Number of VVFC-Eligible Children Your Facility Serves

\_\_\_\_\_ Less than 50 \_\_\_\_\_ Between 251-500 \_\_\_\_\_ Between 1001-1250  
 \_\_\_\_\_ Between 51-100 \_\_\_\_\_ Between 501-750 \_\_\_\_\_ Between 1251-1500  
 \_\_\_\_\_ Between 101-250 \_\_\_\_\_ Between 751-1000 \_\_\_\_\_ Greater than 1500

1. Which vaccines are routinely recommended at this facility? (Please check all that apply)

\_\_\_\_\_ DT \_\_\_\_\_ DTaP \_\_\_\_\_ Hep A \_\_\_\_\_ Hep B/Hib \_\_\_\_\_ DTaP/HepB/eIPV  
 \_\_\_\_\_ Hib \_\_\_\_\_ MMR \_\_\_\_\_ Prevnar \_\_\_\_\_ Varicella \_\_\_\_\_ Other \_\_\_\_\_  
 \_\_\_\_\_ DTaP/Hib \_\_\_\_\_ Hep B \_\_\_\_\_ Td \_\_\_\_\_ e-IPV

2. For which children does your practice routinely recommend PCV-7 (Prevnar) vaccine?

\_\_\_\_\_ All susceptible children through 18 years of age regardless of insurance status  
 \_\_\_\_\_ Only VVFC-eligible children through 18 years of age  
 \_\_\_\_\_ None  
 \_\_\_\_\_ Other \_\_\_\_\_

3. Does this facility participate in a local immunization registry?

\_\_\_\_\_ Yes \_\_\_\_\_ No

4. Would you be interested in participating in a web-based statewide immunization tracking system if one were available?

\_\_\_\_\_ Yes \_\_\_\_\_ No

5a. Have the immunization coverage rates of 2 year old children been assessed in your facility within the last year?

\_\_\_\_\_ Yes \_\_\_\_\_ No (skip to question 6)

5b. If yes to 5a, by whom?

\_\_\_\_\_ State Health Dept \_\_\_\_\_ Local Health Dept \_\_\_\_\_ VVFC \_\_\_\_\_ Own Staff \_\_\_\_\_ MCO Staff  
 \_\_\_\_\_ Other \_\_\_\_\_

5c. If you answered yes to question 5a, what instrument was used?

\_\_\_\_\_ CASA \_\_\_\_\_ Make Every Visit Count \_\_\_\_\_ Other

5d. If you answered yes to question 5a, what were the rates for the 4-3-1-3-3 series at 24 months? \_\_\_\_\_ %

6. Can your facility provide patient and date specific doses administered data?

\_\_\_\_\_ Yes \_\_\_\_\_ No

7a. Does your facility have a systematic way to identify and recall children in need of vaccinations?

\_\_\_\_\_ Yes \_\_\_\_\_ No

7b. If yes to 7a, what kind of system is used?

\_\_\_\_\_ Computerized Recall System \_\_\_\_\_ Tickler File \_\_\_\_\_ Registry \_\_\_\_\_ Periodic Chart Review \_\_\_\_\_ Other: \_\_\_\_\_

**Turn Page**

We want to know your thoughts and opinions about the VVFC Program. Please rate your experience based on the past six months.	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
8. It is easy to screen patients for VVFC eligibility (Using the VVFC Eligibility Screening Forms).	1	2	3	4	5
9. It is easy to comply with VVFC record keeping requirements.	1	2	3	4	5
10. The availability of free VVFC vaccine has increased the number of children vaccinated in our facility.	1	2	3	4	5
11. The availability of free VVFC vaccine has decreased the number of patients referred to public clinics.	1	2	3	4	5
12. The VVFC vaccine accountability system (reporting the number of doses administered, benchmarking, etc.) has merit and helps to ensure the success of the VVFC program.	1	2	3	4	5
13. The information and materials provided by VVFC have been helpful for understanding and working with the program. This would include The <i>Back Page</i> , forms, instruction sheets, and fact sheets.	1	2	3	4	5
14. It is easy to store and maintain the vaccines.	1	2	3	4	5
15. It is easy to order VVFC vaccine.	1	2	3	4	5
16. The VVFC vaccine orders arrive in a timely manner.	1	2	3	4	5
17. The VVFC vaccine orders arrive in a viable condition	1	2	3	4	5
18. There is an adequate range of vaccine brand selections available for VVFC vaccines.	1	2	3	4	5
19. The VVFC staff has been helpful and informative.	1	2	3	4	5
20. Overall, I am satisfied with the VVFC program.	1	2	3	4	5

21. Which of the following forms do you feel could be improved? Please write suggestions in the space provided.

\_\_\_ Registration Form

\_\_\_ Vaccine Replacement Form

\_\_\_ VVFC Order Form

\_\_\_ Vaccine Return Form

\_\_\_ Eligibility Screening Record

\_\_\_ Quarterly Inventory  
(Public)

\_\_\_ Doses Administered Form  
(Public)

22. What do you like most about the VVFC program?

23. Do you have any suggestions on how to improve the VVFC Program?

Comments: